

# Personal Tax Return Checklist 2024



Name: \_\_\_\_\_

Balance Date: 31 March 2024

Postal Address: .....

Telephone No:..... (Work) .....(Home)

..... (Mobile) ..... (Fax)

Email Address: .....

Please advise if you would prefer us to visit you and collect your records.

**IMPORTANT: Please answer all questions, if not applicable write N/A. The information you provide will be used for tax purposes. It is imperative that you ensure the information is accurate and complete. If you have any doubts please inquire.**

Tick if Applicable otherwise enter N/A

*The following information may be required to complete your annual financial statements. If applicable, please tick the appropriate box and provide details.*

## Records Required:

### Income:

- 1. **INTEREST** - provide certificates from financial institutions or other
- 2. **DIVIDENDS** - provide details of dividend warrants (indicate any deductions for withholding tax and/or imputation credits).
- 3. **RENTS** - advise gross rents received and expenses to be claimed against this income (eg rates, interest, repairs, insurance, other).
- 4. **INCOME FROM ESTATES/TRUSTS** - provide details of any income (i.e. interest, dividends, rents, business income or other) and any tax paid by the estate/trust.
- 5. **PARTNERSHIPS** - advise your share of income or losses in all partnerships.
- 6. **SHARE TRADING** - if you have been dealing in shares or you have purchased shares for the purpose of selling at a profit, advise full details of such transactions.
- 7. **STUDENT LOAN** - advise details of loan, repayments, etc.
- 8. **OTHER INCOME** - provide full details.

*All information is required where applicable. Time spent seeking information not originally provided may increase costs.*

**Income:**

9. **OVERSEAS INVESTMENTS/INCOME** - if you have any foreign owned investments please provide details e.g. private companies, listed companies, unit trusts, insurance policies or super schemes together with details of any employment income.

10. **PROPERTY TRANSACTIONS** - provide full details

**Deductions:**

1. **LOSS ATTRIBUTING QUALIFYING COMPANY** - if you have been attributed a share of loss other than from a company we are aware of, please provide details.

2. **EXPENSES** incurred for return preparation or against withholding payments.

3. **INCOME REPLACEMENT INSURANCE POLICIES** - provide details of premiums, if applicable.

**Rebates:**

**DONATIONS, CHILDCARE/HOUSEKEEPER** - Please provide details if you wish us to complete the donation rebate claim form.

**Please provide any further details you may think relevant:**

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**Terms of Engagement**

In supplying this information to **Murray Baxter Chartered Accountant**, I am requesting that they prepare my special purpose financial statements (except where the entity is a company) from the information and records I have provided. An audit or review of the information is not required. I accept responsibility for the accuracy of all information supplied. A copy of this disclaimer of liability will be attached to all special purpose financial reports.

I hereby give authority to **Murray Baxter Chartered Accountant** to communicate with and obtain information from my bank, finance and leasing company, the Inland Revenue Department or any other relevant organization in their completion of the annual financial reports.

I undertake to pay any accounting fees in full as they fall due on the 20<sup>th</sup> of each month for work started but not completed and at the completion of the work. This clause will not apply if an installment payment plan has been agreed in writing.

Client Signature .....

Date .....

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